



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Improvement Application of

Confirmation No.: 2890

Saburo UEHARA

Art Unit: 2857

S. N. 09/805,811

Examiner: M. C. Baran

Filed: March 13, 2001

For: SEMICONDUCTOR DEVICE TESTING APPARATUS AND TEST METHOD

INFORMATION DISCLOSURE STATEMENT

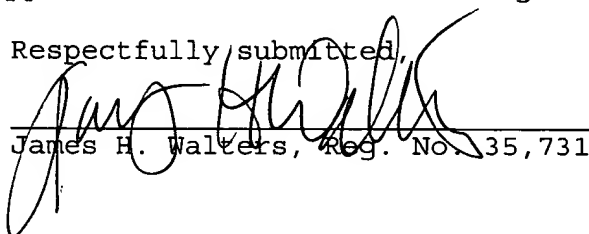
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant/Applicants wishes/wish to draw attention to the documents listed on the accompanying Form PTO-1449, copies of which documents are enclosed.

Pursuant to MPEP 609, it is requested that the Examiner should initial Form PTO-1449 to confirm that each document has been considered, and return a copy of the form to the undersigned.

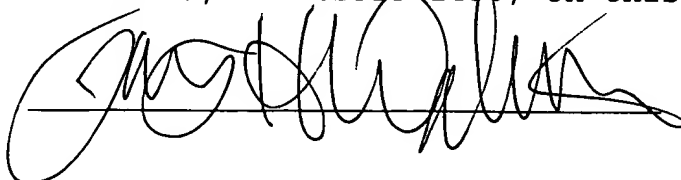
Respectfully submitted,



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I hereby certify that this correspondence is being deposited as first class mail with the United States Postal Service in an envelope addressed to the Mail Stop Petition, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 14th day of June, 2004.



 <p style="text-align: center;">INFORMATION DISCLOSURE CITATION (Use several sheets if necessary)</p>	Docket Number (Optional) A-392	Application Number 09/805,811
	Applicant(s) Saburo UEHARA	
	Filing Date 03/13/01	Group Art Unit 2857

U.S. PATENT DOCUMENTS

*EXAMINER INITIAL	REF	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
		6014033	1/11/2000	Fitzgerald et al	324	765	
		5894226	4/13/1999	Koyama	324	765	

U.S. PATENT APPLICATION PUBLICATIONS

*EXAMINER INITIAL	REF	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE

FOREIGN PATENT DOCUMENTS

	REF	DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	Translation	
							YES	NO

OTHER DOCUMENTS *(Including Author, Title, Date, Pertinent Pages, Etc.)*

EXAMINER	DATE CONSIDERED
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EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP Section 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.